

**CENTRAL STATE HOSPITAL  
Petersburg, Virginia**

**Snap Shot Inspection**

**Office of the  
Inspector General**

**OIG Report # 29-00**

## EXECUTIVE SUMMARY

An unannounced inspection was conducted on the evening of July 17, 2000. Targets for the inspection were the civil units for aggressive males, and medication adjustment unit as well as co-ed units in the forensics unit.

In the civil units, (93-1 and 93-4) the buildings were clean and orderly. Patients were quiet and not engaged in activities. Numbers of staff present were appropriate. We would prefer to see more patient and staff interaction in a less institutional environment.

On the Forensic units the buildings were generally well maintained and clean. The units with remodeled interiors are well designed. These units are much more appropriate and less starkly institutional than other units. Staff was appropriate in numbers and was interacting with patients on the units we observed.

**Facility:** Central State Hospital  
Petersburg, Virginia

**Type of Inspection:** Follow-up Snapshot  
Evening shift – unannounced

**Date:** July 17, 2000

**Reviewers:** Anita Everett, M.D.  
Cathy Hill, M.Ed.  
Dolan J. Pittman  
Micah Nicholson

**Purpose of the Inspection:** To obtain information regarding the general condition of the facility, staffing patterns and patient activities.

**Sources of Information:** Interviews were conducted with staff and patients. Several units were toured. Staff schedule sheets were obtained.

**Areas of Review:** Section One / General Conditions  
Section Two / Patient Activities  
Section Three / Staffing Patterns

This report summarizes the findings during a snapshot inspection of Central State Hospital, which occurred on Monday, July 17, 2000 during the evening shift. The primary purpose of this visit was to conduct a brief, routine and unannounced inspection of the general conditions of the facility, the activities of the patients and the staffing patterns on the day of the inspection.

The inspection occurred on two units in Building # 93, identified by staff as the aggressive male unit and the medication reduction unit. In addition, the team reviewed two units in the forensic Building #39. The on-duty civil and forensic administrators accompanied the teams on the tour, respectively.

Interviews were conducted with staff and patients.

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## SECTION ONE GENERAL CONDITIONS

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**Finding 1.1: The units in building #93 were generally well maintained, clean and orderly but very institutional in appearance.**

Background: Inspections were conducted on the two units currently in use in this building. The units were well maintained with adequate lighting. The living quarters, including bathrooms were clean and free of odors. The furniture was in good repair and comfortable. There were adequate seating arrangements to accommodate the patients. The interiors in these units have had a few positive adaptations to make them more comfortable, but still have a very institutional appearance.

**Recommendation: Encourage staff and patient input regarding enhancing the treatment environment within these buildings.**

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**Finding 1.2: Units in building #39 (the forensics center) were generally well maintained, clean and comfortable.**

Background: Several of the units in this building have recently been remodeled. The new day and treatment space in these buildings is very well designed. The functional nature of the units is maintained but the space is much more bright and fresh than older units. This is an environment that sets a tone of dignity, professionalism and respect for human space and interaction needs.

**Recommendation: None. The remodeled day-rooms create a very appropriate treatment environment.**

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**Finding 1.3: The air conditioning in both buildings was not functioning properly.**

Background: During the tour, it was noted that in general, it was uncomfortably hot in the buildings. This was particularly true of the space in Building #93 designated as the family visiting room and in Ward 8 in Building #39. It was explained that the air conditioning system was not functioning properly. Staff on the forensic unit related that the air conditioning had not been working for the previous two weeks, even though there

had been efforts made by maintenance to repair the problem. They also related that it was felt that the heat was contributing to patients losing their tempers.

**Recommendation: Maintain proper temperature for the comfort of both staff and patients.**

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**Finding 1.3: Building #39 uses specially trained and outfitted officers.**

Background: During the tour, the presence of officers outfitted in "riot gear" was noted. Staff indicated that the very visible presence of these specially trained officers has been very effective in decreasing aggressive behavior on the units. Officers are assigned to particular units but can be used to assist whenever additional intervention is necessary. While it is somewhat discomforting to have these gentleman present in riot gear, they serve as a visible reminder as to the level of aggression that can sometimes be associated with untreated mental illness. We hope that patients as well as staff find the presence of this group a comfort. We will be interested in following the progress of this special force team.

**Recommendation: Please forward any available information regarding the efficacy of this special force of security officers at CSH.**

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**SECTION TWO  
ACTIVITY OF PATIENTS**

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**Finding 2.1: The evening activity of patients was limited in building 93.**

Background: During the early evening hours there were limited non-programming activities available in which patients could get involved. Several patients had attended an ice cream social sponsored by a local church group, but other patients interviewed could not identify any activities in which to occupy their evening time. Patients interviewed in Building #93 related there was very little to do in the evenings, which were typically boring and therefore somewhat frustrating. It was the patient(s) perception that the primary difficulty resulting in the lack of organized or structured leisure activities in the evening was a lack of staffing. Patients indicated it was difficult to get out for walks or to get smoke breaks for the same reason.

In Building 93, most patients were in the dayroom sitting alone. A Christmas program was playing on the television, which prompted comments by two IG team members that this could possibly lead to increased confusion among those with problems with orientation. It was also noted that the clocks in the dayroom and one located in a hallway where the bedrooms were located did not display the same time (an almost twenty minute difference).

**Recommendation: Develop a plan for including unit staff of second and third shifts in the rehabilitation treatment culture at Central State. Second and Third shift should know that their work is not custodial but is an important component in the overall effort to promote wellbeing.**

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**Finding 2.2: There was minimal interaction observed between staff and patients or among patients in Building 93.**

Background: During the tour of Building #93, there were no interactions observed between staff and patients or among patients. In 93-4 there were not any staff members in the dayroom area during the tour. One was observed in 93-1 completing a checklist or status sheet.

It is recognized that the time spent conducting a tour is limited but since contact and interaction is an important aspect for recovery this observation seemed important to note. Several OIG team members discussed how “lonely” the environment appeared which may serve to perpetuate a sense of isolation for patients. It served as one of the primary concerns of several of the OIG reviewers discussed during the course of the inspection.

It is very evident that rehabilitation and habilitation for the patients has improved dramatically over the last two years at Central State. We hope the focus on development of the off-unit treatment malls, has not reduced the role of evening unit staff to custodians of care. All staff should have the knowledge, skills, ability and motivation to participate in patient treatment throughout the entire day.

**Recommendation: The recommendation is the same as the recommendation for Finding 2.1 above.**

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**Finding 2.3 The units in building 39 had appropriate levels of patient activity.**

In one of the units, four patients were engaged in a card game, while several others were either watching television or engaged in conversation. Staff were available and facilitating the environment.

**Recommendation: Staff in Building 39 would also benefit from the recommendation made for Finding 2.1 as above.**

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### **SECTION THREE STAFFING PATTERNS**

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**Finding 3.1: Staffing Patterns in both units on building 93 were consistent with Department of Justice expert recommendations.**

Background: Staffing patterns were adequate and consistent with agreements established between the facility and the Department of Justice for nursing staff. In Building #93, Unit 1 (aggressive male unit) there were 19 patients, 9 on special precautions for aggressive behavior with a ratio of 1 registered nurse (RN) and 4 mental health technicians (MHT). On Unit 4 (medication reduction unit), there were 23 patients with 2 RNs and 3 MHTs.

This is a very positive finding and represents a dramatic improvement over conditions that were present two years ago in this building. The ongoing challenge is to recruit and maintain professional staff at this level.

**Recommendation: None. This is a good level of staffing.**

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**Finding 3.2 The numbers of staff present on each unit of Building 39 was appropriate for the numbers patients within these units.**

Background: Staffing patterns were adequate and consistent with agreements established between the facility and the Department of Justice for nursing staff.

**Recommendation: None regarding numbers of staff present within the forensics building. This is a good level of staffing.**

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**Finding 3.3 There is heavy reliance on the use of Agency Nurses to fulfil RN staffing targets in the forensics building (Building 39).**

Background: It is evident from review of the staff assignment sheet that there is heavy reliance upon the use of agency or “travelling” nurses. This evening, three of the six RN’s on duty were agency Nurses. Other evenings are consistently predominantly staffed with agency nurses. The reliance on agency nurses has been associated with benefits and problems, but is not a permanent solution.

**Recommendation: Please forward the current plan for the ongoing management of the Registered Nursing shortage situation at CSH. If there is not a current working plan, please forward the date by which one will be completed.**

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**Finding 3.4: Staff related that the use of mandatory overtime for Human Service Care Worker (psych tech) had increased recently.**

Background: Interviews revealed that there had been an increase in mandatory overtime in the recent months. Staff indicated that overtime could be as much as twenty to forty hours within a single two-week pay-period. It was felt that this resulted in increased frustration among staff, low morale and performance problems.

Review of the staffing sheets for the July 17<sup>th</sup> revealed that attempts are made to use P14 staff whenever possible. (These would be non-full time, hourly employees.)

Evening Shift: 3 p14 employees

Night Shift: 1 p14 employee and 4 staff overtime

Day Shift: 4 p14 employees and 4 staff overtime

**Recommendation: Please forward the current assessment of and plan for the psych tech overtime situation in building 39 at CSH. If there is not a current working plan, please forward the date by which one will be completed.**